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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

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Attorney Docket No.	00684.003585	77
First Na	med Inventor or Application Identifier	57
TAKENOBU KOBAYASI	II, ET AL.	228 1(

		Express Mail Label No.			
APPLICATION EL See MPEP chapter 600 concerning utility po		ADDRESS TO	Commiss P.O. Box	Patent Application ioner for Patents 1450 a, VA 22313-1450	
Fee Transmittal Form (Submit an original, and a duplicate to	or fee processing)			e, large table or Computer	
2. Applicant claims small entity statu See 37 CFR 1.27.	s.		e and/or Amino Acid ole, all necessary)	Sequence Submission	
3. X Specification T	otal Pages 35	a	Computer Readable	e Form (CRF)	
4. X Drawing(s) (35 USC 113) T	otal Sheets 9	b. Speci i.	ication Sequence Lis	-	
5. Oath or Declaration	otal Pages	ii.	paper		
a. Newly executed (origin	al or copy)	c	c. Statements verifying identity of above copies		
		ACC	MPANYING APPLIC	CATION PARTS	
	cation (37 CFR 1.63(d)) nal with Box 17 completed)	g. Assignme	nt Papers (cover sheet	& document(s))	
Signed State	OF INVENTOR(S) ment attached deleting inventor	10. When the	73(b) Statement ere is an assignee)	Power of Attorney	
named in the 1.63(d)(2) an	prior application, see 37 CFR d 1.33(b).	11. English 1	ranslation Document	(if applicable)	
6. X Application Data Sheet. See 37 (CFR 1.76	1 12 1	on Disclosure t (IDS)/PTO-1449	Copies of IDS Citations	
		13. Prelimina	ry Amendment		
			eceipt Postcard (MPE e specifically itemize		
			Copy of Priority Docu priority is claimed)	ment(s)	
		16 Other:			
17. If a CONTINUING APPLICATION, che	ck appropriate box and supp	ly the requisite information:			
Continuation Divisional Continuation-in-part (CIP) Prior application information: Continuation-in-part (CIP) Group/Art Unit:					
For CONTINUATION OR DIVISIONAL APPS or considered a part of the disclosure of the accomplication relied upon when a portion has been inadverted.	panying continuation or division	nal application and is hereby in	n oath or declaration is corporated by referenc	supplied under Box 5b, is e. The incorporation can only be	
18. CORRESPONDENCE ADDRESS					
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below					
NAME					
Address					
City	State	····	Zip Code		
Country	Telephone		Fax		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	15-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	2-3 =	0	X \$ 86.00 =	\$0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))		\$290.00 =	\$0.00	
				BASIC FEE (37 CFR 1.16(a))	\$770.00
·			Total of	above Calculations =	\$770.00
	Reduction by	50% for filing by small er	tity (Note 37 CFR 1.9,	1.27, 1.28).	
				TOTAL =	\$770.00
19. Sn a.		ntity statement is enclose			
a. b. c. 20.	A small er A small er and desire Is no long X A check in the amo	ntity statement was filed ided. er claimed. ount of \$ 770.00 to count of \$	in the prior nonprovision cover the filing fee is end	closed. enclosed.	
a. b. c. 20.	A small er A small er and desire Is no long X A check in the amo A check in the amo e Commissioner is hereb	ntity statement was filed ided. er claimed. ount of \$_770.00 to count of \$to count of \$	in the prior nonprovision cover the filing fee is end	closed. enclosed.	
a. b. c. 20. 21. 22. Th	A small er A small er and desire Is no long X A check in the amo A check in the amo e Commissioner is hereb 06-1205: X Fees requ	ntity statement was filed ided. er claimed. ount of \$ 770.00 to count of \$	in the prior nonprovision cover the filing fee is end	closed. enclosed.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Scott D. Malpede - Reg. No. 32,533	
SIGNATURE	Just D. Mark	
DATE	February 13, 2004	

SDM/kkv

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